

☐ UNCLASSIFIED ☐ CONFIDENTIAL ☒ SECRET ☐ _____ (specify)

Approved For Release 2005/11/21 : CIA-RDP78B05171A000500020010-2

REQUEST TO PROCUREMENT DIVISION FOR SERVICES

(other than property or building maintenance and repairs)

OFFICE/DIV/BR TSSG/RED/ATB	REQUEST NO. 5500-6076-70	DATE OF REQUEST 13 March 70	I CERTIFY THAT FUNDS IN THE ESTIMATED AMOUNT OF \$ _____ ARE AVAILABLE. CHARGE TO FAN 0155-5350
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PROJECT TITLE Optical Image Manipulation	PROJECT OR CONTACT OFFICER [REDACTED]	EXTENSION B [REDACTED] R [REDACTED]
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CONTRACTOR (if known) [REDACTED]	PROPOSAL NO. AND DATE [REDACTED] P-70-5 2/6/70
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TYPE OF SERVICE REQUESTED		APPLICABLE ONLY TO REPAIRS AND MODIFICATIONS	
☒ RESEARCH/DEV	TRANSFER OF FUNDS TO OTHER GOVT. AGENCY (specify if applicable)	TECHNICAL INSPECTION IS REQUIRED BY	
☐ GRANT		☐ RECEIVING DEPOT T & I	☐ TECHNICAL MONITOR
☐ REPAIR		☐ ITEMS TO BE PICKED UP OR ☐ SERVICES PERFORMED AT:	
☐ MAINTENANCE		ITEMS TO BE REDELIVERED TO:	
☐ MODIFICATION			

CONTRACT CLASSIFICATION SECRET	WORK CLASSIFICATION Unclassified	HARDWARE CLASSIFICATION N/A	REPORTS CLASSIFICATION SECRET
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SHORT SUBSTANTIVE TITLE AND/OR DESCRIPTION OF SERVICE TO BE PERFORMED

Optical Image Manipulation. This program will establish an operational in-house facility for the manipulation of degraded imagery.

Declassification Review by NGA/DoD

(See reverse for specific information required on R&D requests.)

APPROVAL		
DESIGNATION	RE	DATE
[REDACTED]	[REDACTED]	14 MAR 70
[REDACTED]	[REDACTED]	
[REDACTED]	[REDACTED]	

PROCUREMENT DIVISION USE			
DATE RECEIVED IN PD	RECORDED BY	SECTION ASSIGNED TO	NEGOTIATOR

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FORM 3-67 2420 REPLACES FORMS 2420 AND 2416 ☐ UNCLASSIFIED ☐ CONFIDENTIAL ☒ SECRET ☐ _____ (specify)

1. JUSTIFICATION FOR SOURCE SELECTION

25X1 [] has the scientific expertise required to conduct this project. The work involves application of a proprietary technique for characterization of the performance of the manipulation system based on communications theory. Accordingly, no other proposals have been requested.

2. PROPOSAL

Attached

3. DELIVERABLE ITEMS

REPORTS REQUIRED 5 NO. OF COPIES ☒ MONTHLY ☐ INTERIM ☒ QUARTERLY ☒ FINAL

HARDWARE (state type and number)

OTHER

4. GFE REQUIRED

None

5. SPECIAL INSTRUCTIONS

Name of Contractor _____

MONTHLY CONTRACT STATUS REPORT NO.

For Period _____ to _____ Date: _____

Contract No. _____ Task No. _____ Project No. _____

Period of Contract _____ to _____

	<u>Estimated Cost</u>	<u>Fee</u>	<u>Total</u>
Amount of Contract :			

Amount of Obligations
and/or Expenditures This Period:Amount of Obligations
and/or Expenditures to Date :

Estimate of Funds to Complete :

Percentage of Funds Expended to date _____

Percentage of Work Completed to date _____

(Note: All amounts shown must include overhead, G&A, handling charges, fees, etc.)

1. Is work on schedule? _____ (Attach sheets if necessary)
2. Can the Contract be completed in the authorized time? _____
3. Can the Contract be completed with the authorized funds? _____

Comments: (Attach sheets if necessary)

Technical Progress in Period: (Attach sheets if necessary)

Objective for the Next Period: (Attach sheets if necessary)

Submitted by _____